zation review, for displaying indicia identifying said treatments which are selected for utilization review, and identifying those recommended treatments for which ancillary services are indicated;

- (j) identifying payor-approved charges for said treatments:
- (k) comparing said payor-approved charges for said treatments with corresponding actual charges assessed by a proposed health care provider and identifying any insufficiency of payor-approved 10 charges compared to said actual charges;
- providing payroll deduction and supplying said insufficiency by payroll deduction for patients that are paid on organization payrolls;
- (m) providing medical care quality control;
- (n) providing both in-patient and out-patient care;
- (o) preparing recommended post-treatment routines.
- 98. A method of managing an integrated health care management system according to claim 97 further including the step of withholding payment approval for one of said treatments selected for utilization review, until data is entered into said system confirming completion of said utilization review.
- 99. A method of managing an integrated health care 25 management system according to claim 97 further including the step of storing in said data bank memory physical examination results.
- 100. A method of managing an integrated health care management system according to claim 97 further including the step of identifying selected procedures for

second opinions and wherein said utilization review includes providing second opinions.

- 101. A method of managing an integrated health care management system according to claim 97 further including the steps of storing examination results in said data bank memory and identifying selected procedures for second opinions.
- 102. A method of managing an integrated health care management system having input means, payment means and memory storage comprising:
 - (a) storing through said input means into said memory storage personal health profile data for each of a predetermined plurality of persons;
 - (b) storing into said memory storage symptoms and treatment data for each of a predetermined plurality of health profiles and problems;
 - (c) storing in said memory storage criteria for identifying treatments requiring utilization review;
 - (d) storing in said memory storage criteria for identifying treatments requiring second opinions;
 - (e) entering into said system information identifying a proposed medical treatment for one of said plurality of persons;
 - (f) identifying whether or not said proposed medical treatment requires utilization review; and
 - (g) preventing said system from approving payment for said proposed medical treatment if said proposed medical treatment requires utilization review until such utilization review has been conducted.

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